**Health and Care report to the Executive of the Joint Forum of Community Councils in West Lothian June 2021.**

**Feeley Report on Adult Social Care – update**.

An interesting observation from the notes of the **Scottish Carers Collaborative** of 13 April:

“Overall, it was felt that the Independent Review recommendations had the potential to drive change – but only if this took a whole-system approach to adult social care reform.”

I attended, on 9 June, along with about 200 others, **a talk on the subject organised by the Health and Social Care Alliance Scotland**. The panellists were:

* Claire Cairns (Coalition of Carers in Scotland).
* Councillor Stuart Currie (COSLA).
* Annie Gunner Logan (Coalition of Care and Support providers in Scotland).
* Dr Donald Macaskill (Scottish Care) and
* the session was led by well known health journalist Pennie Taylor.

Kevin Stewart (the new Minister for Mental Wellbeing and Social Care) was able to take part for about 45 minutes of the 2 hour session.

*As a former Councillor myself, I had quite a bit of sympathy for Councillor Stuart Currie who is the Leader of the SNP Group on East Lothian Council and COSLA spokesman on Health and Social Care*. He felt obliged to point out that the Feeley Review had 53 recommendations, not 54. Other panellists seemed to think there was an extra recommendation “all of the above”. None of them seemed willing, or able, to prioritise except in relation to “woolly” human rights issues. He was anxious to get across that there are 32 local authorities in Scotland and that every single one is opposed to some key parts of Feeley. There are no Councils in support of the whole report.

The Minister spoke about the ills of the postcode lottery of service provision throughout Scotland. Others at times spoke about local services being decided locally without seeming to recognise the difficulties and contradictions of local service creation being done centrally. He reiterated the proposed government timetable for another consultation round to start in August and legislation within a year. *This didn’t go down well with almost everybody in the audience*. They said there had already been extensive consultation and there was no need for more.

The Minister promised an extra 25% for social care during this parliament - £800 million extra. Stuart Currie claimed that no major party had been prepared to spell out where the extra money was to come from, while Donald Macaskill said that the economics of Feeley did not add up. *The audience however seemed to be overwhelmingly of the view that Feeley was going to usher in some sort of golden age of care! Stuart Currie’s final remarks summed it up pretty well, in my humble opinion – “A lot of people welcomed Feeley and then they read it!”*

**Council Procurement**.

**Wellbeing Scotland** is a voluntary organisation with services across Scotland. They offer specialist, client focused, holistic, trauma informed, therapeutic services and have specialism in abuse and trauma work. The service works with both children and adults, focused on counselling for survivors of domestic abuse. Instances of domestic violence have increased significantly in the past year. The current service has been operating since 2017, with an annual value of £36,000, providing the services of a single counsellor, with a capacity for approximately 40 referrals per year.

Since April 2020 referrals have increased to stand at 116 in May 2021. This has led to a significant waiting time for those referred. As a result of the increased demand, Scottish Government have provided additional funding to support individuals, families and communities.

Officers have recommended approval of a direct award to Wellbeing Scotland for independent counselling for a period of 2 years from June 2021 to May 2023, with an estimated value of £222,000.

**Real Life Options** are contracted to provide day care provision at An Carina Day Centre in Polbeth and provide a high standard of supported day time opportunities, personal care and transport to 12 adults with an assessed learning disability, all of whom have critical or substantial needs. The review of day care provision has been delayed until 2022/23 due to the impact of COVID-19.

Until then, it is important to maintain the current provision. Officers have recommended a direct award to Real Life Options for a period of 18 months from October 2021 to March 2023, with an estimated value of £557,820.

**Contract Risks**. The latest figures I have seen for Social Policy contract performance are as follows:

Out of a total of 98 providers there were none who attracted a risk score of red (high), 17 were amber (medium) and 81 were green (low)

* There are 14 providers delivering substance misuse and mental health services in West Lothian. All of them were assessed as having a risk score of green.
* There are 11 providers delivering services for children, young people and their families. Again, all assessed as green.
* There are 5 providers delivering advice, information and advocacy, also all assessed as green.
* There are 15 providers delivering care at home services. 7 of these assessed as green and 8 as amber. The amber rating is associated with volume of business, contract value and vulnerability of service users.
* There are 14 providers delivering residential care. 12 of these assessed as green and 2 as amber. The amber rating is associated with contract value, vulnerability of service uses and a reduction in Care Inspectorate Grades since the last inspection.
* There are 29 providers delivering services for people with learning disabilities, physical disabilities or autism. 27 of these have been assessed as green and 2 as amber. The amber rating is associated with vulnerability of their clients and value of contract.
* There are 10 providers delivering community based support services for older people, 5 of these assessed as green and 5 amber. The amber rating is associated with vulnerability of their clients, value of contract and financial position.

**COVID-19 Support Payments West Lothian**.

The Scottish Budget for 2021/22 contains provisions for new Pandemic Support Payments. These are intended to provide additional financial support to people living on low incomes, helping to mitigate the impacts of the COVID-19 pandemic and to build financial resilience. The payments comprise:

A £130 **Low Income Pandemic Payment** to be paid to households by the end of October 2021 who are in receipt of Council Tax reduction or who are within agreed groups exempt from Council Tax or are accessing Housing Support service and/or living in temporary accommodation or a refuge. It is estimated that around 16,003 households in West Lothian will be eligible for support, including approximately 15,176 households in receipt of CTR and an estimated 828 households who have a defined exemption from council tax.

Scottish Government guidance is that households should have discretion on how payments should be made. All households will be offered the choice of direct payment to a nominated bank account or a credit to a household’s Council Tax account to reduce their liabilities.

Two £100 **Family Pandemic Payments** paid for each child of school age in receipt of Free School Meals on the basis of low-income eligibility criteria. These payments are to be made in summer and winter respectively. It is estimated that at least 6251 children/ young people in West Lothian will benefit from this measure. Those receiving Free School Meals based on universal provision are not eligible. Those receiving free lunches in Early Learning and Childcare settings are not eligible.

Parents/ Guardians do not have to fill in any forms. Payment will be made automatically into their bank account.

Given the volume and complexity of all the payments, allocated benefit and assessment staff will be recruited on a one-year fixed term contract in order to meet the challenging deadlines.

Recruitment is underway and it is anticipated that staff will be in place by no later than the end of June 2021. It is anticipated that all payments will be made by the end of January 2022, however there may be other additional payments agreed throughout the year and there will be outstanding core activity for the financial year end to be completed. The cost of the staff will be met in full by Scottish Government administration funding.

**New Scottish Cabinet/ Ministers**.

The new Scottish Government Ministerial team has been appointed. A selection below of some relevant to health, care and welfare:

Minister for Drugs Policy (answering directly to the First Minister) – Angela Constance.

**Deputy First Minister and Cabinet Secretary for COVID Recovery** – John Swinney.

**Cabinet Secretary for Health and Social Care** – Humza Yousaf.

* Minister for Public Health, Women’s Health and Sport – Maree Todd.
* Minister for Mental Wellbeing and Social Care – Kevin Stewart.

**Cabinet Secretary for Social Justice, Housing and Local Government** – Shona Robison.

* Minister for Equalities and Older People – Christina McKelvie.
* Minister for Social Security and Local Government – Ben MacPherson.

**COVID-19 Vaccination Status Scheme**.

A service that allows people travelling abroad to access their record of vaccination status themselves has launched.

A vaccination status letter can be downloaded from the NHS Inform Patient Portal [www.nhsinform.scot/covid19status](http://www.nhsinform.scot/covid19status) or – for those not online, requested in the post via a Freephone Covid Status Helpline 0808 196 8565. People who have lost or forgotten their username or password can create new ones by selecting the “forgot” options.

Only those planning to travel to a country or territory where a record of vaccination status is needed as an entry requirement should download the record or request it. While there are no countries currently requiring vaccination status to travel, international travel restrictions can change quickly requiring such measures to be in place.

The measures are intended to ease the burden on the NHS by removing the need to ask their GP for a status record.

**West Lothian COVID-19 Dataset**.

There has been a slight rise in the **claimant count** (6,570) to 5.6% at end March 2021. One notable pattern that is emerging relates to in-work (increasing) v out of work claimants.

**Youth unemployment** continues to be above both the Scotland and UK rates. There are now just over 1,300 young people claiming unemployment benefits. Young people have continued to bear the brunt of the crisis amid large scale job losses in sectors such as hospitality and retail. Across the UK, people under 25 accounted for more than 53% of payroll jobs lost in the year to March 2021. It is also worth noting that West Lothian has a pre-existing high proportion of young people compared to the rest of Scotland which also affects the figures.

The **Furlough Scheme** has been extended until the end of September, continuing in its present form until the end of June, with a phased reduction in the level of funding from July.

The **Self-Employment Income Support Grant Scheme** was extended in the form of two further grants, November 2020 to January 2021 and February to April 2021. There was a 71% take up rate for the Second extension (average claim £2.500) and a 67% take up for the third extension (average claim £2.800).

**COVID-19 Deaths in Care Homes - Care Inspectorate Statistics**.

From the first notification of a death related to COVID-19 in a care home, on 16 March 2020, up to the end of March 2021, the Care Inspectorate had received 3,774 notifications of COVID-19 related deaths of residents of care homes.

National Records of Scotland already publishes official statistics about COVID-19 related deaths. Their statistics are the definitive record of deaths in Scotland and the Care Inspectorate data, which is self-reported by individual care homes, cannot be of the same quality. Nevertheless CI data does present a unique picture of the impact COVID-19 has had on care homes, and especially care homes for older people.

CI data does match the overall trends and scale of NRS data, although a key difference is that CI statistics on COVID-19 related deaths show a higher number than NRS. This is because CI data includes all deaths of care home residents, including those who have died in hospital and those who have been resident even for a short period of time. NRS statistics are based on the place of death and exclude residents who may have died in hospital or had been resident for a short period of time.

**Background Information.**

* At 31 March 2021, there were 1,069 care homes in Scotland, 75% of which were for older people and 25% were for adults. These care homes provide over 40,600 places: 92% of which were in care homes for older people and the remaining 8% in care homes for adults, meeting a range of needs of younger adults including people with learning disabilities, mental health issues, alcohol and drug misuse and physical and sensory impairment.
* These care homes were provided by 483 different providers, of which the majority (72%)provided only one care home, 19% provided between two and five care homes, and the remaining 9% provided 6 or more, with 41 care homes registered under the largest provider.
* In Scotland, care homes are provided by the public sector, the private sector and the voluntary or not-for-profit sector. In care homes for older people, the private sector provides 75% of care homes and 81% of places. The voluntary sector provides the majority of care homes for adults (63%) although they provide proportionately fewer places (49%) with the private sector providing a further 45% of places.
* The register of care homes is dynamic, with care homes registering and cancelling over time. In total there were 1,136 care homes operating at some point during 2020/21. Over the year, 67 care homes cancelled their registrations and 53 care homes registered, giving a net reduction of 14 care homes and 383 places. Note that these registrations and cancellations include 48 that cancelled and re-registered over the period. This presents some challenges both in presenting and interpreting the data.

**COVID-19 related deaths in care homes.**

* Care homes for older people were most affected: 3,761 (99.7%) of these deaths occurred in care homes for older people, and 510 (59%) care homes for older people reported at least one COVID-19 related death.
* Putting the numbers of COVID-19 related deaths in the context of the size of the care home sector, overall there were 9.2 deaths per 100 registered places. Note that rate per 100 places is not a percentage as care homes are not always fully occupied and the population of residents changes over time.
* As the size of a care home increased, so too did the rate of COVID-19 related deaths per 100 places from 2.1 deaths per 100 places in care homes with up to 20 places, rising to 12.6 deaths per 100 places in care homes with more than 80 places.
* In care homes for adults there were 0.4 deaths per 100 places, with low rates across all sectors. In care homes for older people there were 10.1 deaths per 100 places, with rates slightly higher in the voluntary and private sectors (10.4 and 10.2 respectively) compared with the public sector (8.6).
* A comparison of quality of each care home prior to the pandemic with rates of COVID-19 related deaths showed no clear relationship with similar rates of COVID-19 related deaths in the care homes previously rated very good or excellent, adequate or good and weak or unsatisfactory.
* Care homes located in the most populated areas had higher rates of COVID-19 related deaths than those in the most remote areas: 11.6 per 100 places in large urban areas compared with 3.7 per 100 places in remote small towns.

**Herbert Protocol**.

This is an aid to assist Police enquiries in the event of a missing person. Police Scotland’s J Division, including West, Mid and East Lothian and Scottish Borders are participating in this initiative, which was launched on 31 May to coincide with Dementia Awareness Week.

The Herbert Protocol is a national scheme which encourages carers, family and friends to collate useful information on one form, which can quickly be accessed and then used in the event of a vulnerable person going missing. The initiative is named after George Herbert, a Normandy veteran , who lived with dementia and sadly died while he was “missing” on his way to visit his childhood home.

Police research shows that fatalities decrease significantly when a person is found within 12 hours of the “last time seen.” When someone with dementia goes missing, the safeguarding clock is ticking. The Herbert Protocol can help reduce delays in mounting an effective search response.

The simple form contains valuable information about the person that can be passed to the police at the point they are reported missing. Information gathered can include but is not limited to the individual’s personal details and photograph, description, medical information and personal circumstances.

It is also helpful to record work history, favourite places, hobbies and living patterns. Often people with dementia are found heading towards places which have some particular significance for them.

The Protocol form should be completed by the individual who knows the person best, a care provider, a family member, a close associate, or in some cases by the person themselves. In a care setting, the provider should seek permission from either the person themselves or their next of kin. It should be updated on a regular basis, whenever there is a change in circumstances.

It should be kept in a safe place, where it is easily accessible and can be found quickly, perhaps the person’s front door or attached to their fridge. If the person is reported missing, the form can be passed to the police saving valuable time.

**Care Homes Visiting**.

The Care Inspectorate has spelt out their position on visiting. They recognise the complex and difficult circumstances that care homes in Scotland have been working under, and they acknowledge and commend the continued commitment of care home providers and staff to care for people with compassion and dignity.

People must be able, and supported, to have meaningful contact (this includes enabling privacy for visits) with loved ones and, now that the vaccination programme is well underway, it is right that care homes are open again to visitors. Some providers may have concerns about the opening of care homes, but people’s rights and needs must be the focus of decision making.

The Scottish Government has published **Open with Care**, guidance that clearly sets out how care homes can welcome visitors safely with the appropriate measures in place. **The Care Inspectorate fully expect every care home to facilitate visiting and implement Open with Care**.

All homes must ensure the wellbeing of the individual is central to all decision making about visiting. It is not acceptable for homes to make blanket decisions to restrict or prevent visiting.

Such practice compromises people’s human rights. **Open with Care** provides advice on balancing rights with safety and gives guidance on good practice, infection prevention and control, and testing of visitors.

The Inspectorate will monitor for homes not implementing the guidance and contact them to offer support for implementation. Where the guidance is not being implemented, or essential visiting is not in place, providers will be required to take action. In addition to routine visiting, all care homes must continue to support and enable compassionate **essential visiting** as defined and set out in Section 07 of **Open with Care**.

**Children’s Social Work Statistics**.

The Scottish Government published the Children’s Social Work Statistics on 30 March 2021. The report presents information collected on children and young people who were formally looked after, under child protection measures, or in secure care at some point between August and July 2020.

Local Councils have a responsibility to provide support to certain vulnerable young people, known as **Looked after Young Children**. A young person may become Looked After for a number of reasons, including neglect, abuse, complex disabilities which require specialist care or involvement in the youth justice system.

There are several types of placements that Looked After Children or Young People could be placed in, including at home (where a child is subject to a Supervision Requirement and continues to live in their normal place of residence), foster care, residential unit or school, a secure unit or a kinship placement (where they are placed with friends or relatives).

As at 31 July 2020, there were 14,458 Looked After Children and Young People in Scotland an increase of 196 compared to 2019. This is the first year of increase after seven consecutive years of decline from a peak of 16,246. The key national trends identified in the report are:

* A continued decrease in children being looked after at home with this group accounting for only 25% of the 2020 total against 40% in 2010.
* Foster care and kinship care are the most common settings for Looked After Children.
* Numbers of children looked after in residential care settings have been fairly static over recent years at around 10% of the overall total.
* There is a reduction in the proportion of children becoming looked after aged 12-15, from 32% in 2010 to 26% in 2020. The longer-term pattern of children starting to be looked after at younger ages than this is offset by a slightly increased proportion becoming looked after aged 16 – 17, up to 5% in 2020 from 1% in 2010. 15% starting episodes of care were less than one year old, increasing from 13% in 2010.
* The proportion of children leaving care due to being adopted decreased to 6% in 2020 from 7% in 2019. The majority of adoptions (73%) are of children aged under five.

In West Lothian the Looked After population has been relatively static since 2012 – 441 under the care of Social Policy in July 2020, up from 427 in 2019. 23% of these West Lothian children are under the age of 5, higher than the Scottish average of 19%, and 12% are over the age of 16, lower than the Scottish figure of 14%.

**Child Protection** means protecting a child from abuse or neglect. This can either be in cases where abuse or neglect has taken place or in cases where a likelihood of significant harm or neglect has been identified. Where a child is believed to be at risk of significant harm, their name will be added to the child protection register. In 2020 the number on the child protection register increased from 2,580 in 2019 to 2,654. The key national trends identified within the report are:

* Between 2008 and 2018, there were more children aged under five than five or over on the child protection register. This changed in 2019, with just over half being aged five or over. In 2020, again around half of children on the register were aged under five (1,325) and half were 5 or over (1,329).
* There is no strong gender pattern among children on the register – 47% were boys, 48% were girls, and the remaining 5% were unborn.
* Causes for concern relating to emotional abuse, parental substance misuse, domestic abuse, parental mental health problems and neglect are the most prevalent.

The situation in West Lothian has largely mirrored national trends. In July 2020, 92 children in West Lothian were on the child protection register, compared to 104 in 2019.

Young people are placed in **Secure Care** either as an outcome of the criminal justice system through a referral to the Children’s Reporter or in response to immediate risk pending a Children’s Hearing. Secure Care generally refers to accommodation for children and young people who pose a significant risk to either themselves and/or others and are likely to run away or abscond.

Such a placement, within secure accommodation, can only be determined by the authority of a Children’s Hearing, a Chief Social Work Officer or by the order of a court. Across Scotland, there was an average of 82 residents in secure accommodation throughout 2019-20, (79 the previous year). Of that figure, 53 came from within Scotland. Most of the others came from England. *The Secure Care figures bug me because I think I ought to know why they look so strange and I just can’t remember!*

**Alzheimer Scotland Report**

Henry Simmons, Chief Executive of Alzheimer Scotland, wrote an open letter to launch Dementia Carers Week. People with dementia and their families have been significantly impacted by the COVID-19 pandemic, and the subsequent measures put in place to mitigate the spread of the virus.

Almost every component of what could, and should, be a good system of personalised care and support for people with dementia and their families has been shattered. For well over a year, almost all direct community support has been delivered exclusively by families themselves.

There is no doubt there has been a good level of digital based support introduced, which was enabled by local authorities agreeing to the flexible use of their commissioned funds, and registered services being allowed to adapt their support. This level of pragmatic partnership, alongside the commitment of frontline staff to develop new skills and abilities in digital and online based care, has been invaluable in helping many people cope and get through this pandemic. However it would be wrong not to recognise that, as a result of the pandemic, the fundamental foundations of high-quality person-centred care from the point of diagnosis to end of life that we have been promoting and advocating for many years, has been decimated.

The principles of a timely early diagnosis and high-quality post diagnostic support which builds on an individual’s own natural support networks, their hopes, strengths and ambitions, have been the bedrock of practice which have enabled people to live well with dementia. Over the past year, this has simply not been able to be delivered. The Scottish Government estimated that around 20,000 people will be diagnosed in 2020 and we know that prior to the pandemic fewer than 50% of this group were offered post diagnostic support. There is a community of people waiting to be diagnosed, as well as those individuals newly diagnosed, who have not had the opportunity to properly come to terms with the illness, to build a strong level of resilience and any form of meaningful self-management. If we do not respond to their needs we will simply be accelerating the level of crisis and need for formal care services, such as care homes, to a level we have not seen for decades, and perhaps never seen before.

**Beatlie School Campus**.

In 2017, a review of Additional Support Needs education in West Lothian identified the need for changes to property assets such as Beatlie School which support the delivery of ASN education. The business case for the project provided for a new school to be built. It highlighted that replacing the existing school would provide a new, modern, purpose-built, specialist profound needs school and a specialist nursery for our most vulnerable children.

The Council’s Capital Programme incorporates a budget allocation of £6.75M for the new School based on a 50:50 support for construction costs by the Scottish Government. The project now includes partner accommodation for the NHS Child Development Centre which is currently located at the existing Beatlie Campus. The CDC is being funded entirely by the NHS.

The preferred location identified by officers for the new Beatlie School is on the existing playing fields to the east of Craigswood Xcite, West Lothian Leisure Sports Facility. The site is currently used as open space and football pitches. Existing users can be accommodated on other pitches and open space to the west.

The NHS currently operate the CDC from the existing Beatlie School Annex. This integrated facility, between Education Services and NHS Lothian, is best practice and held up as an exemplar service for the assessment and development of children with additional support needs. NHS Lothian have confirmed their preference for the new Beatlie School to have an integrated CDC as part of the project and have underlined their commitment with an initial payment of £1 million as a contribution to the CDC, with the balance to be reconciled at Financial Close.

Through Hub South East, the Council have procured a full design team and appointed Morrison Construction Scotland as tier one contractor. The school has been designed to accommodate Nursery, Primary and Secondary pupils with a hydrotherapy pool and a fully integrated hoist system that is designed into the fabric of the building to enable all pupils to have full access to all appropriate areas that will provide maximum support to staff and carers for transitions between mobility aids. The school is being designed with enhanced energy reduction measures.

The timescale envisaged is as follows:

* Stage 1 report approved by Council – 25 June 2021
* Stage 2 report submitted to Council by HUBco - - 14 February 2022
* Stage 2 report approved by Council – 8 April 2022
* Financial Close (reported to Council Executive for approval) – 13 May 2022
* Construction Commencement – 10 June 2022
* Construction Completion – 31 August 2023

A separate report will be presented to the Education Executive to consider the intention to commence public consultation on the proposal to relocate Beatlie School to the new purpose built facility at Craigswood. It is anticipated the outcome of the consultation will be presented to the Education Executive in November 2021.

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